Assistive Technology

Augmentative Alternative Communication Plan

Student’s name: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

School: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ Date: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Disability:**  (Check all that apply)

 Intellectual Disability Vision Impairment  Traumatic Brain Injury

 Hearing Impairment  Autism  Orthopedic Impairment, Type:\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Current Related Services Received:**

Occupational Therapy  Physical Therapy  Language Therapy

**Assistive Technology Currently Used:**  (Check all that apply)

 Manual Communication Board  Augmentative Communication Device (multi)

 Adapted Computer  Low Tech communication device (single)

 Low Tech Vision Aids  Environmental Aid to Daily Living

 Manual wheelchair  Power wheelchair

**Fine Motor related to Computer/Device Access**

**1. Range of motion:** Student has specific limitations to range:  Yes  No Describe the specific range in which the student has the most motor control:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**2. Abnormal reflexes and muscle tone:**   Yes No Describe briefly any abnormal reflex patterns or patterns of low or high muscle tone which may interfere with the student’s voluntary motor control. \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**3. Accuracy:** Student has difficulty with accuracy: Yes No

Describe how accurate, reliable and consistent the student is in performing a particular fine motor task:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**4. Fatigue:** Student fatigues easily:  Yes No Describe how easily the student becomes fatigued:

\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

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**5. Assisted direct selection:**  What type of assistance for direct selection is student using? (Check all that apply)

 N/A

 Keyguard  Head pointer/stick, mouth/chin stick

 Pointers, hand grips, splints etc.  Light beam/laser

**6. Size of grid student is able to access:**

What is the smallest square the student can accurately access:  1”  2”  3”  4”

What is the optimal size grid? Size of square:\_\_\_\_\_\_\_

Number of squares across\_\_\_\_\_\_\_\_\_\_

Number of squares down\_\_\_\_\_\_\_\_\_\_

**7. Scanning:**  If student cannot direct select, does the student use scanning?

 No  Yes, if yes:  Step  Automatic  Inverse  Other:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**8. Preferred control/switch site (body site):**

 Left hand  Right hand  Eye(s)

 Left arm  Right arm  Head

 Left leg  Right leg  Mouth

 Left foot  Right foot Tongue

 Finger(s)  Eyebrows  Other:

**9. Type of switch:**  The following switch(es) are being used: (Check all that apply)

 Touch (jellybean)  Light touch Wobble  Rocker

 Joystick  Lever  Head switch  Sip/puff

 Arm slot  Eye brow Tongue

 Tread  Other: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Communication**

**1. Student’s present means of communication:** (Check all that are used; **circle** the primary method the student uses.)

Changes in breathing patterns Body position changes

Eye-gaze/eye movement  Facial expressions

Gestures Pointing/Touching

Sign language approximations Sign language # signs\_\_\_\_\_\_\_\_\_\_,

# combinations\_\_\_\_\_\_\_\_\_, # signs in a combination \_\_\_\_\_\_\_\_\_

 Vocalizations, list examples:\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Vowels, vowel combinations, list :\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Single words, list examples & approx. # \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

2-word utterances 3-word utterances

 Semi intelligible speech, estimate % intelligible:\_\_\_\_\_\_\_\_\_\_\_\_

Communication board: tangibles,  pictures,  symbols,,  words

Voice output AC device (name of device):\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 Reliable no Reliable yes

To indicate “yes” and “no”, the student:

 Shakes head  Signs  Vocalizes  Gestures  Eye gazes

 Points to board  Uses word approximations  Does not respond consistently

Always Frequently Occasionally Seldom Never

Turns toward speaker      

Interacts with peers      

Aware of listener’s attention     

Initiates interaction     

Asks questions     

Responds to communication       

Requires verbal prompts     

Requires physical prompts      

**2. Mobility:** (Check all that apply)

 uses wheelchair walks

drops or throws things frequently

carries device under 2 pounds with shoulder strap

uses a device that is mounted \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

 uses device with digitized (human) speech

uses device w/large number of words or phrases

Uses PECS system

**2. Pre-reading and reading skills related to communication:**

Yes  No Object/picture recognition

Yes  No Symbol recognition (tactile, TOBIS, Mayer-Johnson)

Yes  No Auditory discrimination of sounds

Yes  No Auditory discrimination of words, phrases

Yes  No Selects initial letter of word

Yes  No Follows simple directions

Yes  No Sight word recognition

Yes  No Can put two symbols or words together to express an idea

**3. Visual abilities related to communication:**  (Check all that apply)

Maintain fixation on stationary object looks to right -left without moving head

Scans line of symbols left to right Scans matrix of symbols in a grid

Visually recognizes people Visually recognizes common objects

Visually recognizes photographs Visually recognizes symbols or pictures

Needs additional space around symbol Visually shift horizontally

Can visually shift vertically Recognizes line drawings

Is a specific type (brand) of symbols or pictures preferred?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What size symbols or pictures are preferred?\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

What line thickness of symbols is preferred? \_\_\_\_\_\_\_ inches

Student seems to do better with \_\_\_ black on white, \_\_\_\_ white on black, \_\_\_\_, a specific color combination for figure/ground discrimination (describe) \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

# Recreation & Leisure

**1. T**he student demonstrates the following skills for Recreation/Leisure: (Check all that apply.)

 Cause and effect computer activities Follows complex directions

 Understanding turn taking Communicates with others

Handling/manipulating objects operates a computer

 Throwing/catching objects Operates TV, VCR, etc.

Understands rules Other \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Waits for his/her turn \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Follows simple directions \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**2. What activities does the student especially enjoy?**



**3. Assistive technology being used for rec/leisure?** (Check all that apply.)

Toys adapted with Velcro™, magnets, handles, \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Toys adapted for single switch operation

Adaptive sporting equipment, such as lighted or beeping ball

Universal cuff or strap to hold crayons, markers

Modified utensils, e.g. rubber stamps, rollers, brushes

Ergo Rest or other arm support \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

Electronic Aids to Daily Living (operates TV, VCR, CD player, blender, lights)

Software to complete art activities

Games on the computer

Other computer software : \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_

**Assistive Technology Plan of Care:**

1. Continue low tech voice output devices: single message and four message devices
2. Expand use of symbols for choices of preferred activity
3. Replace inappropriate behaviors with symbol communication: 1. lying on adult for attention with a picture of the preferred adult; 2. pushing chair back and sweeping items off work space with symbol of no, use first/then strategy.

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**Speech Language Pathologist/Credentials**